Case 24-11685-amc Doc 28 Filed 06/26/24 Entered 06/26/24 11:28:38 Desc Main Document Page 1 of 3

Fill in this information to identify your case:						
Hortense	C.	Tippett				
First Name	Middle Name	Last Name				
First Name	Middle Name	Last Name				
ptcy Court for the:	Easte	ern District of Pennsylvania				
24-11685						
	Hortense First Name  First Name ptcy Court for the:	Hortense C.  First Name Middle Name  First Name Middle Name  ptcy Court for the: Easter				

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
☑ 3. The commitment period is 3 years.
4. The commitment period is 5 years.
Check if this is an amended filing

## Official Form 122C-1

## Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: Calculate Your Average Monthly Income					
1.	What is your marital and filing status? Check one only.  ✓ Not married. Fill out Column A, lines 2-11.  ☐ Married. Fill out both Columns A and B, lines 2-11.					
va ex	Ill in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the paried during the 6 months, add the income for all 6 months are example, if both spouses own the same rental property, put the 0 in the space.	6-month period w nd divide the total	ould be March by 6. Fill in the	1 through August 31. If the result. Do not include any	e amount of your month y income amount more t	ly income han once. For
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, and copayroll deductions).	ommissions (befo	ore all	\$0.00		
3.	Alimony and maintenance payments. Do not include paym	nents from a spou	se.	\$0.00		
4.	All amounts from any source which are regularly paid for your dependents, including child support. Include regular unmarried partner, members of your household, your dependent roommates. Do not include payments from a spouse. Do not on line 3.	contributions from	n an Ind	\$0.00		
5.	Net income from operating a business, profession, or farm					
	Gross receipts (before all deductions)  Ordinary and necessary operating expenses	\$0.00 -	\$0.00 \$0.00			
	Net monthly income from a business, profession, or farm	\$0.00		opy ere → \$0.00		
6.	Net income from rental and other real property	Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$0.00	\$0.00			
	Ordinary and necessary operating expenses	\$0.00 -	\$0.00			
	Net monthly income from rental or other real property	\$0.00	Ψ0.00	opy ere → \$0.00		

Debtor 1	Hortense	C.	Tippett	Ca	Case number (if known) 24-11685		
	First Name	Middle Name	Last Name				
				Column A  Debtor 1	Column B  Debtor 2 or  non-filing spou	se	
7. Interest, d	lividends, and royalti	es		\$0	0.00		
8. Unemploy	ment compensation			\$(	0.00		
Do not en	ter the amount if you	contend that the amo	unt received was a benefit	under			
the Social	Security Act. Instead	, list it here:					
For yo	ou		<u>\$</u>	5500.67			
For yo	our spouse						
under the include an States Go death of a under cha exceed the under any 10. Income f not include a victim of terrorism States G death of	Social Security Act. Any compensation, pen vernment in connection member of the uniform pter 61 of title 10, there amount of retired participation of title 10 of the amount of title 10 of the any benefits received any benefits received a war crime, a crime; or compensation, per overnment in connections.	Also, except as stated sion, pay, annuity, or on with a disability, comed services. If you in include that pay on ay to which you would ther than chapter 61 s not listed above. Seed under the Social See against humanity, or ension, pay, annuity, of the than disability, comed services. If necession, pay, annuity, or the comed services. If necession, pay, annuity, or med services.	amount received that was a in the next sentence, do not allowance paid by the Unite or or callowance paid by the Unite or or callowance paid by the Unite or or callowance any retired pay pay by to the extent that it does not or that title.  The pecify the source and amounts or callowance paid by the Unite or allowance paid by the Unite or allowance paid by the Unite or callowance	ot od odd or odd	<u></u>		
Total amo	unts from separate pa	ages, if any.		+	+		
	e your total average in the state of the state of the total for		I lines 2 through 10 for each I for Column B.	\$2,416	.80 +	= \$2,416.80  Total average monthly income	
Part 2: Det	ermine How to M	easure Your Dedu	uctions from Income			monthly income	
12. Copy you	ur total average mon	thly income from line	<b>11.</b>			\$2,416.80	
13. Calculate	e the marital adjustm	ent. Check one:					
<b>√</b> You are	not married. Fill in 0 l	below.					
You are	married and your spo	ouse is filing with you	Fill in 0 below.				
☐ You are	married and your spo	ouse is not filing with	you.				
	pendents, such as pay			ularly paid for the household support of someone other th			
	specify the basis for e al adjustments on a s		and the amount of income of	devoted to each purpose. If	necessary, list		
	djustment does not ap	· ·					
				+			
Total				\$0.00	Copy here. $ ightarrow$	\$0.00	
	rent monthly income					\$2,416.80	
14. Tour cur	rent monthly income	. Jubliaci ilie itiai III	mie io nom mie 12.			φ2,410.00	

Debtor 1

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Debtor 1	Hortense	C.	Tippett	Case number (if known) <b>24-11685</b>	<u>;                                    </u>
	First Name	Middle Name	Last Name		
		-	ar. Follow these steps:		¢2 446 90
					\$2,416.80
Multip	oly line 15a by 12 (t	the number of months	ın a year).		<b>x</b> 12
15b. The	result is your curre	nt monthly income for	the year for this part of the fo	rm	\$29,001.60
16. Calculate	the median family	income that applies t	o you. Follow these steps:		
16a. Fill in	n the state in which	you live.	Pennsy	<u>/Ivania</u>	
16b. Fill in	n the number of peo	ople in your household	d1		
16c. Fill ir	n the median family	income for your state	and size of household		\$66,923.00
To fin	d a list of applicable	e median income amo	ounts, go online using the link available at the bankruptcy cl	specified in the separate	
17. How do th	e lines compare?				
<sub>17a.</sub> 🗹	Line 15b is less th	an or equal to line 16	c. On the top of page 1 of this	form, check box 1, Disposable income is not determined	under 11
17h 🗍	- , , ,	•		r Disposable Income (Official Form 122C–2). ck box 2, Disposable income is determined under 11 U.S.	C 5
17b. <b>-</b>	1325(b)(3). <b>Go to</b>		culation of Your Disposable	Income (Official Form 122C–2). On line 39 of that form, c	
Part 3: Calcu	ulate Your Com	mitment Period U	nder 11 U.S.C. §1325(b)(	(4)	
18. Copy your	total average mor	nthly income from line	e 11		\$2,416.80
calculating amount fro	the commitment pom line 13.	eriod under 11 U.S.C.	§ 1325(b)(4) allows you to de	ot filing with you, and you contend that educt part of your spouse's income, copy the	.,
			on line 19a		\$0.00
19b. <b>Subtra</b>	act line 19a from lin	ne 18.			\$2,416.80
20. Calculate	your current montl	hly income for the ye	ar. Follow these steps.		
20a. Copy lir	ne 19b				\$2,416.80
Multiply	by 12 (the number	r of months in a year).		X ·	12
20b. The res	ult is your current n	nonthly income for the	e year for this part of the form.		\$29,001.60
20c. Copy th	e median family inc	come for your state an	d size of household from line	16c	\$66,923.00
21. How do th	e lines compare?				
Line 20b	is less than line 20 Inmitment period is 3	oc. Unless otherwise of years. Go to Part 4.	ordered by the court, on the to	op of page 1 of this form, check box 3,	
		ual to line 20c. Unlessent period is 5 years.		urt, on the top of page 1 of this form,	
Part 4: Sign	Below				
By signing h	nere, under penalty	of perjury I declare th	at the information on this stat	ement and in any attachments is true and correct.	
<b>X</b> <u>/s/</u>	Hortense C. Tip	pett			
Sign	nature of Debtor 1				
Date	06/25/2024 MM/ DD/ YYYY				
			_		
· ·		I out or file Form 1220 m 122C–2 and file it w		at form, copy your current monthly income from line 14 ab	ove.